

APPLICATION FOR COPIES OF VITAL RECORDS

Aric Wilhelm Yadkin County Register of Deeds

PO Box 211
336-679-4225

Yadkinville, NC 27055
www.yadkincountync.gov

Certified Copies are \$10/each

Uncertified Copies are 25¢/each

Cash, Check or money order accepted

Complete Appropriate Sections: (Print or Type)

SECTION 1A	BIRTH CERTIFICATE	<p>Full Name at Birth: _____ <div style="display: flex; justify-content: space-between; width: 80%;"> First Middle Last </div> </p> <p>Place of Birth _____ Date of Birth: _____ <div style="text-align: center; font-size: small;">(Hospital or City/County)</div> </p> <p>Father's Full Name: _____</p> <p>Mother's Full Maiden Name _____ <div style="text-align: center; font-size: x-small;">Maiden name of mother is required</div> </p>	<p><input type="checkbox"/> Certified #copies _____</p> <p><input type="checkbox"/> Uncertified #copies _____</p> <div style="border: 1px solid black; padding: 2px; font-size: x-small;"> <i>Office Use Only</i> Type of ID Presented _____ Book/Page _____ Certificate # _____ </div>
SECTION 1B	DEATH CERTIFICATE	<p>Full Name of Deceased: _____ <div style="display: flex; justify-content: space-between; width: 80%;"> First Middle Last </div> </p> <p>Date of Death: _____</p> <p>Location of Death (City/County): _____</p>	<p><input type="checkbox"/> Certified #copies _____</p> <p><input type="checkbox"/> Uncertified #copies _____</p> <div style="border: 1px solid black; padding: 2px; font-size: x-small;"> <i>Office Use Only</i> Type of ID Presented _____ Book/Page _____ Certificate # _____ </div>
SECTION 1C	MARRIAGE CERTIFICATE	<p>Full Name of Spouse 1: _____ <div style="display: flex; justify-content: space-between; width: 80%;"> First Middle/Maiden Last </div> </p> <p>Full Name of Spouse 2: _____ <div style="display: flex; justify-content: space-between; width: 80%;"> First Middle/Maiden Last </div> </p> <p>Date of Marriage: _____</p> <p>Location of Marriage (City/County) _____</p>	<p><input type="checkbox"/> Certified #copies _____</p> <p><input type="checkbox"/> Uncertified #copies _____</p> <div style="border: 1px solid black; padding: 2px; font-size: x-small;"> <i>Office Use Only</i> Type of ID Presented _____ Book/Page _____ Certificate # _____ </div>
SECTION 2	<p>Your Relationship to the Person Whose Certificate is Requested: (Check One)</p> <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <p><input type="checkbox"/> 1. Self</p> <p><input type="checkbox"/> 2. Spouse</p> <p><input type="checkbox"/> 3. Brother/Sister</p> <p><input type="checkbox"/> 4. Child/Step-Child</p> </div> <div style="width: 50%;"> <p><input type="checkbox"/> 5. Parent/Step-Parent</p> <p><input type="checkbox"/> 6. Grandparent/Grandchild</p> <p><input type="checkbox"/> Seeking information for legal determination of personal or property rights</p> <p><input type="checkbox"/> Authorized agent, attorney or legal representative of the person listed in 1-6 (Proof Required)</p> </div> </div>		
SECTION 3	<p>I certify that all the above information that I have provided is true to the best of my knowledge. Note: It is a felony violation of North Carolina Law to make a false statement on this application or to unlawfully obtain a certified copy of a birth certificate.</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Signature of Person Requesting Certificate _____</p> <p>Physical Street Address _____</p> <p>City, State and Zip Code _____</p> </div> <div style="width: 45%;"> <p>Printed Name of Person Requesting Certificate _____</p> <p>() _____</p> <p>Date _____ Telephone Number _____</p> </div> </div>		

A picture ID is required for certified copies.

For requests by mail: Include a self-addressed, stamped envelope. If requesting a certified copy, include a copy of your current driver's license, state-issued ID or other approved photo ID.